

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|--------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | <i>[Signature]</i> | | 8-2-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
| 6 | ✓ |
| 7 | ✓ |
| 8 | ✓ |
| 9 | ✓ |
| 10 | ✓ |
| 11 | ✓ |
| 12 | ✓ |
| 13 | ✓ |
| 14 | ✓ |
| 15 | ✓ |
| 16 | N |
| 17 | |
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| 26 | N |
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| 30 | N |
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| 38 | N |
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| 44 | N |
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| 50 | N |

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 51 | N |
| 52 | N |
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| Claim | Date |
|----------|------|
| Final | |
| Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

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